## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8 2004

**Application or Docket Number** 

|  |   |   |                       |                                    |              |   |            | <u> </u>            | 10/561981              |            |                     |                        |
|--|---|---|-----------------------|------------------------------------|--------------|---|------------|---------------------|------------------------|------------|---------------------|------------------------|
|  |   | Claims A                                  | •                     | 3 FILED - PART (<br>(Column 1) (C  |              |   | ,          | SMALL EN            | TITY                   | OR         | OTHER<br>SMALL      |                        |
| U.S  | 3. NATIONAL   | STAGE FEES                                |                       |                                    | (Column 2)   | 7   | RATE       | FEE                 | ·<br>                  |            | 7                   |                        |
| BASIC FEE  |   |   | SWALL ENT. = 8 150 LA |                                    | LAR          | GE ENT. = \$ 300  |            | BASIC FEE           | 1                      |            | RATE<br>BASIC FEE   | FEE                    |
| EXAMINATION FEE  |   |   |                       |                                    | Ali o        | ther situations =                                       | ∦ .        | EXAM. FEE           |                        |            |                     | 300                    |
| SEARCH FEE   |   |   | U.S. is ISA 4 (       | U.S. is ISA = \$50/\$100           |              | \$ 100 / \$ 200<br>ther situations =<br>\$ 250 / \$ 500 |            | SEARCH FEE          |                        |            | SEARCH FEE          | 200                    |
| FE   | FOR EXTRA   | SPEC. PGS.                                | minus 100 =           |                                    |              | /50 =   |            | X.\$ 125 = .        |                        | ╣.         | X \$ 250 =          | 400                    |
| TO   | TAL CHARGEA   | BLE CLAIMS                                | ≬∮ mi                 | minus 20 =                         |              |   |            | X \$ 25 =           |                        | OR         | X \$ 50 =           |                        |
| IND  | EPENDENT CL   | AIMS                                      |                       |                                    |              |   |            | X \$ 100 =          |                        | OR         | X \$ 200 =          |                        |
| -  | *   | DENT CLAIM PRI                            | SENT                  |                                    |              |   |            | + \$ 180 =          |                        | OR         | +\$ 360 =           |                        |
| ° If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |                       |                                    |              |   | ט ע        | TOTAL               |                        | OR         | ŤOTAL               | 900                    |
|  | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |   |                       |                                    |              |   | i r        | SMALL E             |                        | OR         | OTHER<br>SMALL E    | ALILA                  |
| AMENDMENT A  |   | REMAINING<br>AFTER<br>AMENDMENT           | G NUMBER PREVIOUS     |                                    | BER<br>OUSLY | R PRESENT<br>SLY EXTRA                                  |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                 | o o                                |              | 2   |            | X \$ 25 =           | <del></del>            | OR         | X \$ 50 =           |                        |
|  | Independent   | *   | Minus                 | <del>û û û</del>                   |              | s   |            | X \$ 100 =          | <del></del>            | OR         | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                |   |                       |                                    |              |   |            | + \$ 180 =          |                        | OR         | + \$ 360 =          |                        |
|  |   |   |                       |                                    |              |   |            | TOTAL ADDIT.<br>FEE | ·                      | oR         | TOTAL ADDIT.<br>FEE |                        |
| •  | ır —  | (Column 1)                                | ·                     | (Colum                             |              | (Column 3)  |            | · .                 |                        | ,<br>      | ·<br>·              |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHE<br>NUMB<br>PREVIOI<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA  |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | <b>A</b>                                  | Minus                 | άú                                 | -            | =   |            | X \$ 25 =           | ·                      | OR         | X \$ 60 =           |                        |
| AWE  | Independent   | ۵   | Minus .               | <del>aa</del> ġ                    |              | =   |            | X \$ 100 =          |                        | OR         | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                |   |                       |                                    |              |   | +*\$ 180 = | ·                   | or                     | + \$ 360 = |                     |                        |
|  |   |   |                       |                                    |              | <del></del>   | و کا       | TOTAL ADDIT.<br>FEE |                        | OR         | TOTAL ADDIT.        |                        |
| ٠.   |   | •   |                       | <i>:</i>                           |              |   |            |                     |                        |            |                     |                        |
| ٠  | If the entry in colu  | ımn 1 is less than the                    | entry in entrime 1    | t urila MAR in                     | . aalumu     |   |            |                     |                        |            | •                   | •                      |

The "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.